

# The Medical Examination

**The Embassy's appointed medical practitioner is:** *Knightsbridge Doctors.*

**Medical examinations are performed at:** **4 Bentinck Mansions, London W1U 2ER** which is within walking distance from Bond Street Station on the Jubilee and Central lines of the London Underground and **15 Basil Mansions, Basil Street, London SW3 1AP**, which is very close to Knightsbridge Underground Station on the Piccadilly Line. **You will be advised which of the two offices you must attend when you make your call.** The enclosed maps and directions will assist you in locating both premises.

**Scheduling the appointment:** You may schedule an appointment by telephoning **020 7486 7822**, Monday to Friday, from 9:00 a.m. to 5:00 p.m. You **must** quote your case number when making your call. Appointments are scheduled on a first come, first served basis.

**Fees:** An adult medical examination (i.e. aged 15 and over) costs £235.00; a child's medical examination (aged 14 and under) costs £110.00. Additional charges may apply if further tests are required. Payment is made at the time of the medical examination either in cash, or by credit card (Visa or MasterCard) or debit card. **Personal checks are not acceptable.**

**Missed appointment/cancellation fees:** If you fail to keep your appointment or cancel/change it with less than three clear working days' notice, you will be liable for a cancellation charge of £95.

**Forms and documents that must be presented to the examining physician on the day of the appointment:**

- **A photograph for each person attending the medical, including babies.** The specifications of the photograph are the same as those obtained for the visa;
- **Vaccination records for each person attending the medical, including babies.** Vaccination records are dependent on age. See chart on pages 7 & 8;
- **Passport, driving license or photo license;**
- **Police certificate** issued by ACPO – (applicants aged 16 and over only);
- **Medical questionnaire** which is printed on page 9 of this packet must be completed for **each person attending a medical, including babies; and**
- Applicants who have ever been treated for **Tuberculosis (TB)** are required to bring all medical and specialist reports relating to the diagnosis and treatment.

**Special notice for K visa applicants:** K visa applicants are not required to meet the vaccination requirements at the time they apply for a visa. However, they are required to meet them at the time they apply for an adjustment of status in the United States. If you take your vaccination records to the medical appointment, it may be possible to use the results of the medical examination in the United States.

In most cases **the results of the medical examination** will be couriered to the Embassy **four working days** after the appointment date. If, during the course of the examination, it is found necessary to refer you to a specialist for a further diagnosis, the panel physicians will assist you in locating one. In such cases it will not be possible to issue the medical results in four workdays.

**In general, the medical examination is valid for 12 months and the chest X-ray for 6 months but can be shorter.** The panel physician will advise you further on the day of the medical examination.

### **What to Expect at the Medical Examination**

The medical examination consists of a physical examination (eyes, ears, nose, throat, extremities, heart, lungs, abdomen, lymph nodes, skin and external genitalia) chest X-ray and a blood test, which includes testing for venereal disease. The blood test and X-ray are generally not required of persons under the age of 15, but they are required, under existing United States immigration law, of all other persons. **Note:** Pregnant women are required to undergo an X-ray. You will have an opportunity to discuss this further on the day of the appointment.

A chaperone will be offered to a female where the doctor is male, or for children.

**Vaccinations:** On the day of the medical examination, the physician will be required to verify that you have met the vaccination requirement, or that it is medically inappropriate for you to receive one or more of the following vaccinations: Hepatitis A; Hepatitis B; Influenza, Influenza Type B (HIB); Meningococcal, Mumps; Measles; Pertussis; Pneumococcal; Polio, Rubella Tetanus and Diphtheria Toxoids; Varicella. **NOTE:** The Varicella vaccination is unavailable in the United Kingdom.

In order to assist the health centre, and to avoid delays in the processing of your visa, you should have your vaccination records available for review at the time of the medical examination. **Please consult with your regular health care provider to obtain a copy of your immunization record, if one is available.** If you do not have a vaccination record, the panel physician will work with you to determine which vaccinations you may need to meet the requirement and can provide any that you are lacking on the day of your appointment. Please refer to the last page of this package for a chart showing the required vaccinations and age restrictions and a breakdown of costs for each one. If the vaccination record is not in English, please have the document translated and signed by a doctor.

#### **IMPORTANT NOTICE**

Only after your medical examination has been completed successfully and the consular officer has interviewed you can a decision be reached as to your eligibility under the law to receive a visa. You should NOT make any final travel arrangements, nor take other irrevocable actions until the visa has been issued and you are in receipt of your passport.



## How to find us

Knightsbridge Doctors  
is located at 4 Bentinck Mansions,  
Bentinck Street  
London W1U 2ER  
just off Marylebone Lane in the  
heart of London's medical world.

### Arriving by Taxi

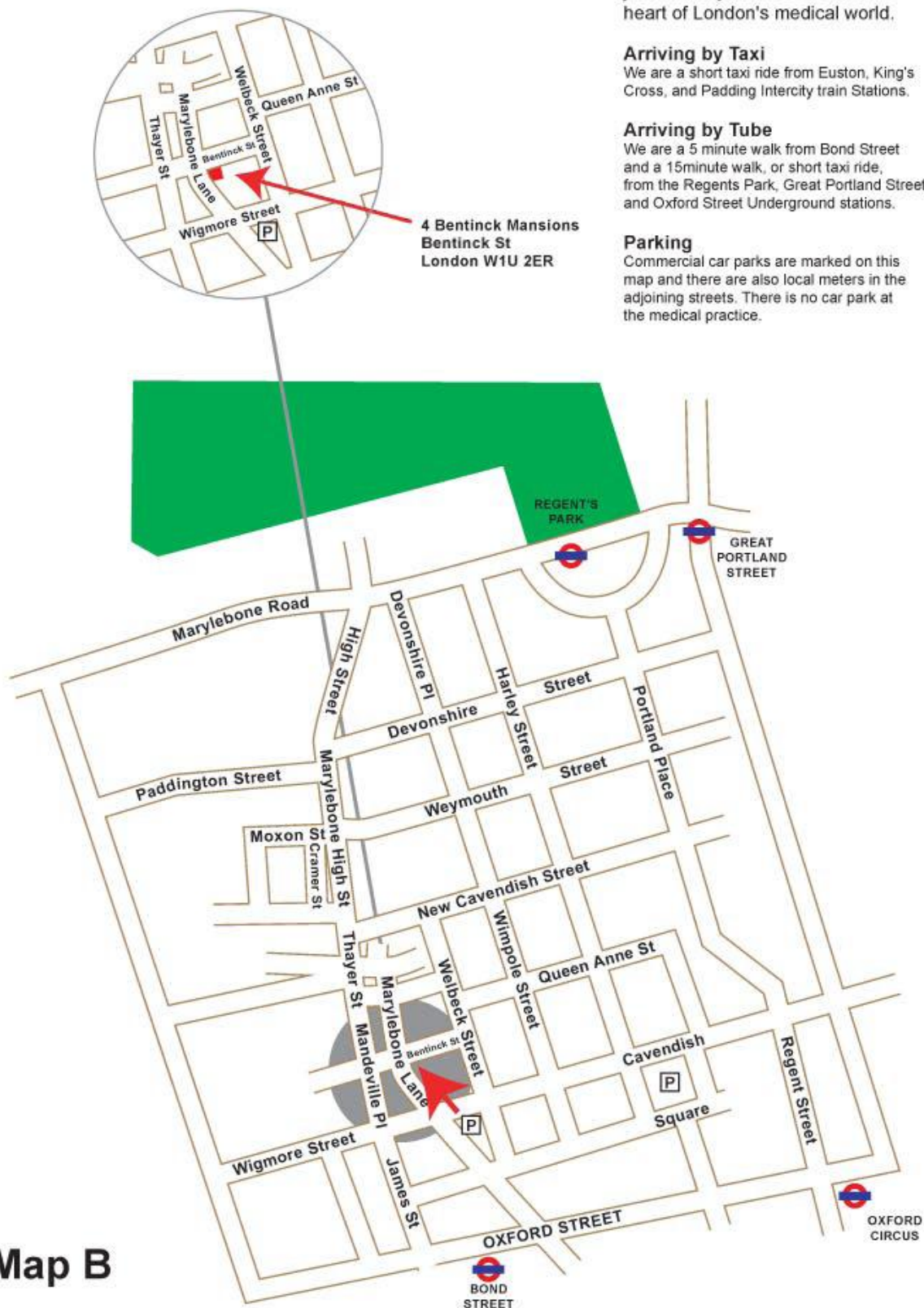
We are a short taxi ride from Euston, King's  
Cross, and Padding Intercity train Stations.

### Arriving by Tube

We are a 5 minute walk from Bond Street  
and a 15minute walk, or short taxi ride,  
from the Regents Park, Great Portland Street  
and Oxford Street Underground stations.

### Parking

Commercial car parks are marked on this  
map and there are also local meters in the  
adjoining streets. There is no car park at  
the medical practice.



Map B

## Basil Street

The practice is situated in Knightsbridge, just yards from Harrods and Harvey Nichols, and a 2-minute walk from Knightsbridge Underground. The practice is based on the ground floor of a mansion block at 15 Basil Mansions, Basil Street, London SW3 1AP



### How to get to the Practice

**By car:** The nearest public car park is the Pavilion Road NCP (entrance via Stackhouse Street), just behind the practice. Both metered parking and Kensington and Chelsea residents' parking are available in surrounding streets. There are 2 disabled parking bays in Basil Street.

**By Underground:** Knightsbridge Underground station is on the Piccadilly line. For the simplest route to the practice, take the 'Harrods' exit. If you are travelling westbound, this exit will be found at the far left of the platform. If you are travelling eastbound, this exit will be on the far right of the platform. As you exit the Underground with Harrods on your right, take the first left turn into Basil Street. 15 Basil Mansions is within a mansion block on the right, just after and opposite the Capital Hotel.

#### **By Bus:**

**Brompton Road: 14, 74, 414, C1**

**Sloane Street: 19, 22, 137, C1**

**Knightsbridge: 9, 10, 14, 19, 22, 52, 74, 137, 414**

## Frequently Asked Questions

**Can I go to a different medical facility or to my own doctor?** Unfortunately no. Only Knightsbridge Doctors' medical practitioners have been authorized to conduct medical examinations on behalf of the U.S. Government.

**I have recently undergone a medical examination on behalf of my employer/insurance company. Can I use the results of this examination at the time of my immigrant visa interview?** I regret not. Only a medical examination conducted for an immigrant visa application is acceptable.

**Do I require vaccinations?** If you are applying for an immigrant visa you will be required to have certain vaccinations as described on pages 7 & 8. While it is not necessary for K visa applicants to have these vaccinations in order to obtain their visa, they will be required to meet the vaccination requirement in the United States at the time they apply for an adjustment of their status with the US Citizenship and Immigration Services from nonimmigrant to conditional or permanent resident.

**I do not wish to have/ I do not wish for my child to have some of the vaccinations. What should I do?** If you do not comply with the vaccination requirements, your immigrant visa application will be refused. While waivers of the vaccination requirement are sometimes available on moral and religious grounds, you should be aware that such an application carries an application fee of \$585.00 and can take several months to process, thus delaying the issuance of the visa. You will be required to discuss this with the consular officer on the day of your visa interview at the Embassy.

**When do I contact the Embassy and when do I contact Knightsbridge Doctors?** Detailed information concerning visa application procedures, the visa interview, the medical examination and what to expect once you enter the United States on the visa is available from the Embassy's website at <http://London.usembassy.gov> . Case specific inquiries may be directed to the Embassy Operator Assisted Information Service – 09042 450 100 (calls cost £1.23/min plus network extras). Questions concerning the scheduling of the medical examination should be directed to Knightsbridge Doctors. **Please note that Knightsbridge Doctors cannot answer any questions concerning the visa application process.**

## **KNIGHTSBRIDGE DOCTORS PRICING INFORMATION**

<b>Item</b>	<b>Description</b>	<b>Unit Price £</b>
1	Basic Medical Examination – Adult (15 years of age and older)	235.00
2	Basic Medical Examination – Child (under 15 years of age)	110.00
3	Bacteriological examination of sputum	115.00
4	DNA Collection (under 18/over 18)	50.00/100.00
5	Medical Examination for X-Ray (6 monthly review)	160.00
6	Non-Immigrant Visa	280.00
7	Drug & Alcohol Laboratory Test Fee (per test)	48.00
	<b>Supplemental Charges for vaccination against:</b>	
8	Diphtheria, tetanus and pertussis	37.00
9	Tetanus, diphtheria and polio	35.00
10	Measles, Mumps and Rubella	40.00
11	Hepatitis A	38.00
12	Hepatitis B (Energix)	37.00
13	Varicella	Not available
14	Pneumococcal - Adult	37.00
15	Pneumococcal - Child	75.00
16	Influenza	22.00
17	Meningococcal MCV	35.00
18	Rotavirus	67.00
19	Hepatitis A+B Child	40.00
20	Hepatitis B Child	40.00
21	DTaP+Hib	45.00
22	Syphilis treatment	110.00
23	Drug Screen	48.00

## Vaccination Requirements

Vaccine	Age						
	Birth - 1 month	2 - 11 months	12 months to 4 years	5 - 6 years	7 - 17 years	18 - 64 years	≥ 65 years
DTP/DTaP/DT	No	Yes			No		
Td/Tdap	No				Yes, ≥ 7 years old (for Td); 10-64 years old (for Tdap)		
Polio: IPV or OPV	No	Yes				No	
MMR	No		Yes if born in 1957 or later				No
Varicella (Chickenpox) Not available in the UK	No		Yes				
Pneumococcal	No	Yes, through 59 months of age (for PCV)		No		Yes (for PPV)	
Vaccine	Age						
	Birth - 11 months	12 - 23 months	24 months to ≥ 65 years				
Hepatitis A	No	Yes	No				
Vaccine	Age						
	Birth - 18 years			≥ 18 years			
Hepatitis B	Yes, through 18 years of age			No			
Vaccine	Age						
	Birth - 1 month	2 - 59 months	≥ 60 months				
Hib	No	Yes	No				
Vaccine	Age						
	Birth - 5 months	6- 59 months	60 months to 49 years	≥ 50 years			

Influenza	No	Yes	No	Yes Annually each flu season			
Vaccine	Age						
	Birth - 10 years	11 - 18 years	19 years to ≥ 65 years				
Meningococcal (MCV/MPSV)	No	Yes	No				
Vaccine	Age						
	Birth - 1 month	2 - 6 months	12 months to 4 years	5 - 6 years	7 - 17 years	18 - 64 years	≥ 65 years
Rotavirus	No	Yes	No				

DTP=diphtheria and tetanus toxoids and pertussus vaccine;

DTAP=diphtheria and tetanus toxoids and acellular pertussis vaccine;

DT=pediatric formulation diphtheria and tetanus toxoids;

Td=adult formulation tetanus and diphtheria toxoids;

IPV=inactivated polio vaccine (killed);

OPV=oral polio vaccine (live);

MMR=combined measles, mumps, rubella vaccine;

Hib=Haemophilus influenzae type b conjugate vaccine;

PCV=pneumococcal conjugate vaccine;

PPV=pneumococcal polysaccharide vaccine.

## USA MEDICAL QUESTIONNAIRE

**(MUST BE COMPLETED AND SIGNED BY APPLICANT PRIOR TO MEDICAL APPOINTMENT)**

<b>CASE NUMBER:</b>		<b>VISA APPOINTMENT DATE:</b>	
<b>NAME:</b>	<b>(Last)</b>	<b>(First)</b>	<b>(Middle)</b>
<b>DATE OF BIRTH:</b>		<b>AGE:</b>	<b>GENDER:</b> male <input type="checkbox"/> female <input type="checkbox"/>
<b>BIRTHPLACE: (City/Country)</b>			
<b>PRESENT COUNTRY OF RESIDENCE:</b>			
<b>PRIOR COUNTRY:</b>			
<b>NATIONALITY:</b>		<b>OCCUPATION:</b>	
<b>CURRENT ADDRESS:</b>			
<b>TEL:</b>			
<b>HEIGHT (in centimetres):</b>		<b>WEIGHT (in kilos):</b>	
		<b>YES</b>	<b>NO</b>
<b>1</b>	Have you ever been hospitalized (including psychiatric admission)?		
<b>2</b>	Have you ever had a disease of your heart or circulation?		
<b>3</b>	Have you ever had a disease of your lungs?		
<b>4</b>	Have you ever used tobacco?		
<b>5</b>	Have you ever had tuberculosis?		
<b>6</b>	Have you ever had a stroke, seizures or other neurological disorder?		
<b>7</b>	Do you have a major impairment in learning, intelligence, self-care, memory or communication?		
<b>8</b>	Have you ever had any mental disorder or depression?		
<b>9</b>	Have you ever misused or abused drugs?		
<b>10</b>	Have you ever had an addiction to or abused alcohol?		
<b>11</b>	Have you ever caused deliberate injury to yourself or others?		
<b>12</b>	Have you ever caused deliberate damage to property or had trouble with the law because of a mental condition, mental disorder or while under the influence of alcohol or drugs?		
<b>13</b>	Have you ever had any sexually transmitted disease?		
<b>14</b>	Have you ever had yaws, leprosy or malaria?		
<b>15</b>	Have you ever had diabetes mellitus or other endocrine disorder?		
<b>16</b>	Have you ever had a malignancy (cancer)?		
<b>17</b>	Have you ever had any kidney or liver disease?		
<b>18</b>	Do you have any visible disability (including loss of arms, legs or eyes)?		
<b>19</b>	Is any medical treatment (including surgery) pending or anticipated?		
<b>20</b>	Do you take any medication? (Please list all medications on a separate sheet)		
<b>21</b>	Are you pregnant?		
	If the answer is yes, please provide evidence of pregnancy/copy of pregnancy test result.		
	Date of last period:	Expected delivery date:	
<b>DATE: +</b>		<b>SIGNATURE:</b>	